

## **Application Data Sheet**

### **Application Information**

Application number::	Not Yet Assigned
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	MULTI-STEP METHOD FOR THE DIFFERENTIATION OF INSULIN POSITIVE, GLUCOSE RESPONSIVE CELLS
Attorney Docket Number::	ESCL-P01-124
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	7
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Diana
Family Name::	Clarke
City of Residence::	Cambridge
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	89 Hancock Street, Apt. 6
City of mailing address::	Cambridge



State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02139

Applicant Authority Type:: Inventor  
Status:: Full Capacity  
Given Name:: Josephine  
Middle Name:: S.  
Family Name:: D'Alessandro  
City of Residence:: Marblehead  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 16 Seaview Avenue  
City of mailing address:: Marblehead  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01945

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Kuanghui  
Family Name:: Lu  
City of Residence:: Brookline  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 65 Glen Road  
Unit 8-5  
City of mailing address:: Brookline  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02445

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US

Status:: Full Capacity  
Given Name:: Anlai  
Family Name:: Wang  
City of Residence:: Newton  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 19 Lill Avenue  
City of mailing address:: Newton  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02465

**Correspondence Information**

Correspondence Customer Number:: 28120

**Representative Information**

Representative Customer Number:: 28120

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/399476	07/29/02
This Application	Non-Provisional of	60/409847	09/11/02
This Application	Non-Provisional of	60/452732	03/07/03

**Assignee Information**

Assignee name:: ES Cell International Pte Ltd.